

As the below named inventor(s), I/we declare that:

PTO/SB/01A (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

This declaration is dire	ected to:				
	The attached application, or				
<u> </u>	Application No10/624,051	, filed on07/21/2003,			
	as amended on	(if applicable);			
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;					
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;					
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and					
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FULL NAME OF INV	/ENTOR(S)				
Inventor one: Mar	rlin H. Mickle				
Signature:	Citize	en of: US			
Inventor two: Chr	ristopher C Capelli				
Signature:	Citize	en of: US			
Inventor three: Har	rold Swift				
Signature:	exact fairff Citiz	en of: US			
Inventor four:					
Signature:	Citize	en of:			

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box

PTO/SB/81 (02-01)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

## **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	10/624,051		
Filing Date	07/21/2003		
First Named Inventor	Marlin H. Mickle		
Title	ENERGY HARVESTING CIRCUITS AND ASSOCIATED METHODS		
Group Art Unit			
Examiner Name			
Attorney Docket Number	214001-01021-1		

I hereby	appoint:	and the second and the second		er er er kraur von somhen bliva i den blige	
OR		Customer Number	003705	<b>□</b>	Place Customer Number Bar Code Label here
Name			Regist	Registration Number	
		- Committee of the comm		moderate to the Analysis is	
		and the same and t			
		r agent(s) to prosecut States Patent and Tra			
Please cha	ange the corre	espondence address t	for the above-ident	ified application	on to:
	above-mentior	ned Customer Numbe	er.	_	
OR Proof	itionara at Cu	stomer Number			Place Customer Number Bar Code
OR	illoners at Cu	stomer Number			Label here
Firm o					
	lual Name				
Address Address					
City	<u>.</u>			State	Zip
Country					
Telephone					
I am the:					
<b>✓</b> Ap	plicant/Invent	or.			
Assistance of accord of the cooling interest Coc 27 OFD 2 74					
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name	Marlin	H. Mickle	154		
Signature					
Date Nov. 10, 2003					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple					
forms if more than one signature is required, see below*.					
✓ *Total of3forms are submitted.					

Please type a plus sign (+) inside this box

PTO/SB/81 (02-01)
Approved for use through 10/31/2002. OMB 0651-0035
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

## POWER OF ATTORNEY OR **AUTHORIZATION OF AGENT**

Application Number	10/624,051		
Filing Date	07/21/2003		
First Named Inventor	Marlin H. Mickle		
Title	ENERGY HARVESTING CIRCUITS AND ASSOCIATED METHODS		
Group Art Unit			
Examiner Name			
Attorney Docket Number	214001-01021-1		

I hereby appoint:				
Practitioners at Customer Number 003705  OR Practitioner(s) named below:	Place Customer Number Bar Code Label here			
Name	Registration Number			
as my/our attorney(s) or agent(s) to prosecute the application identified business in the United States Patent and Trademark Office conf				
Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number.  OR  Practitioners at Customer Number  OR  Place Customer Number Bar Code Label here				
Firm or Individual Name				
Address				
Address				
City	State Zip			
Country				
Telephone F	Fax			
I am the:  ✓ Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assignee of Record				
Name Christopher C Capelli				
Signature ////////////////////////////////////				
Date //, ( 0. U3				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or forms if more than one signature is required, see below*.	r their representative(s) are required. Submit multiple			
✓ *Total of forms are submitted.				

Please type a plus sign (+) inside this box PTO/SB/81 (02-01)
Approved for use through 10/31/2002. OMB 0651-0035
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

## **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	10/624,051	7
Filing Date	07/21/2003	
First Named Inventor	Marlin H. Mickle	
Title	ENERGY HARVESTING CIRCUITS AND ASSOCIATED METHODS	
Group Art Unit		
Examiner Name		
Attorney Docket Number	214001-01021-1	

I hereby appo	oint:	The second secon	······································		
OR	ners at Customer Number	003705	□	Place Customer Number Bar Code Label here	
	Name	The second secon	Registrat	tion Number	
			· · · · · ·		
	And the same Association for the same and th	en en amperiore de la companyone de la c			
	as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.				
Please change	the correspondence address	for the above-identi	fied application	to:	
	-mentioned Customer Numb	er.			
<i>OR</i>				Place Customer Iumber Bar Code	
Practitione	rs at Customer Number			abel here	
Firm or					
Individual Na	ame				
Address					
Address					
City		<u>  S</u>	state	Zip	
Country			. 1		
Telephone			ax	And the second s	
l am the:					
Applican	nt/Inventor.				
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name	Harold Swift			nemokada Africa (*	
Signature	// 0 / . 1				
Date					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple					
forms if more than one signature is required, see below*.  *Total of forms are submitted.					
10tal of3	forms are submitted.				